APPLICATION DATA SHEET

Application Information

Application Number:: New

Filing Date:: 01/23/04

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification:: None

Suggested Group Art Unit:: None

CD-ROM or CD-R?:: None

Sequence Submission:: None

Computer Readable Form (CRF)?:: No

Title:: METHODS OF TREATING INFLAMMATION

Attorney Docket Number:: BEP 3011

Request for Early Publication?:: No

Suggested Drawing Figure:: None

Total Drawing Sheets:: 39

Small Entity?:: Yes

Petition Included?:: No

Licensed US Govt. Agency:: None

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Canada

Status:: Full Capacity

Given Name:: Steven

Middle Name:: N.

Family Name:: Mink

Name Suffix::

City of Residence:: Winnipeg

State or Province of Residence:: MAN

Country of Residence:: Canada

Street Mailing Address:: 1106-7 Evergreen Place

City of Mailing Address:: Winnipeg

State or Province of Mailing Address:: Manitoba

Country of Mailing Address:: Canada

Postal or Zip Code of Mailing Address:: R3E 0Z3

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Hans

Middle Name::

Family Name:: Jacobs

Name Suffix::

City of Residence:: Roesrath

Country of Residence:: Germany

Street Mailing Address:: Thomas Mann Str. 5

City of Mailing Address:: Roesrath

Country of Mailing Address:: Germany

Postal or Zip Code of Mailing Address:: D-51503

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Primary Citizenship Country:: Canada

Status:: Full Capacity

Given Name:: Deepak

Middle Name::

Applicant Authority Type::

Family Name:: Bose

Name Suffix::

City of Residence:: Winnipeg

State or Province of Residence:: MAN

Country of Residence:: Canada

Street Mailing Address:: 46 Lancaster Boulevard

City of Mailing Address:: Winnipeg

Inventor

State or Province of Mailing Address:: Manitoba

Country of Mailing Address:: Canada

Postal or Zip Code of Mailing Address:: R3P 0E4

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Canada

Status:: Full Capacity

Given Name:: Krika

Middle Name::

Family Name:: Duke

Name Suffix::

City of Residence:: Winnipeg

State or Province of Residence:: MAN

Country of Residence:: Canada

Street Mailing Address:: 244 Elmhurst Road

City of Mailing Address:: Winnipeg

State or Province of Mailing Address:: Manitoba

Country of Mailing Address:: Canada

Postal or Zip Code of Mailing Address:: R3R 0T4

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Canada

Status:: Full Capacity

Given Name:: R.

Middle Name:: Bruce

Family Name:: Light

Name Suffix::

City of Residence:: Winnipeg

State or Province of Residence:: MAN

Country of Residence:: Canada

Street Mailing Address:: 50 McNulty Crescent

City of Mailing Address:: Winnipeg

State or Province of Mailing Address::			Manitoba				
Country of Mailing Address::			Canada				
Postal or Zip Code of Mailing Address::			R2M 5H4				
Correspondence Info	rmation	ı					
Correspondence Customer Number::			30868				
Name::	Name::			Arlir M. Amado			
Street of Mailing Address::		Kramer & Amado, P.C.					
		2001 Jefferson Davis Highway					
			Suite 1101				
City of Mailing Address::			Arlington				
State or Province of Mailing Address::		VA					
Country of Mailing Address::		US					
Postal or Zip Code of Mailing Address::		22202					
Phone Number::		703-413-5000					
Fax Number::		703-413-5048					
E-mail address::		arlir@kramerip.com					
Representative Inform	mation						
Representative Customer 30868							
Number::							
Domestic Priority Info	ormatio	า					
Application::	Continu	Continuity Type::		Parent Application::		Parent Filing Date::	
This application	Provisional			60/442,060		01/24/03	

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Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::